# **BASIC FINANCIAL STATEMENTS**

WITH AUDITORS' REPORT

**JUNE 30, 2003 AND 2002** 

## JUNE 30, 2003 AND 2002

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# Vavrinek, Trine, Day & Co., LLP Certified Public Accountants & Consultants

VALUE THE DIFFERENCE

#### INDEPENDENT AUDITORS' REPORT

The Honorable Board of Supervisors County of San Bernardino, California:

We have audited the accompanying basic financial statements of Arrowhead Regional Medical Center (Medical Center), a fund of the County of San Bernardino (County), as of and for the year ended June 30, 2003, as listed in the accompanying table of contents. These financial statements are the responsibility of the Medical Center's management. Our responsibility is to express an opinion on these financial statements based on our audit. The basic financial statements of the Medical Center for the year ended June 30, 2002 were audited by other auditors whose report dated January 17, 2003 on those statements was unqualified but included an emphasis of matters paragraph that stated the Medical Center had not presented management's discussion and analysis.

We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

As discussed in Note 1 of the notes to basic financial statements, the financial statements present only the Medical Center and do not purport to, and do not, present fairly the financial position of the County as of June 30, 2003, and the changes in its financial position and the cash flows of its proprietary fund types for the year then ended in conformity with accounting principles generally accepted in the United States of America.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the Medical Center as of June 30, 2003 and the changes in its financial position and its cash flows for the year then ended in conformity with accounting principles generally accepted in the United States of America.

The Medical Center has not presented management's discussion and analysis that accounting principles generally accepted in the United States of America has determined is necessary to supplement, although not required to be part of, the basic financial statements.

Vavaniele, Trine, Day : Co., LLP

Rancho Cucamonga, California September 18, 2003

## STATEMENTS OF NET ASSETS

## JUNE 30, 2003 AND 2002

# (In Thousands)

	2003	2002
ASSETS		
Current Assets		
Cash	\$ 5,059	\$ 339
Assets whose use is limited	1,387	1,387
Patient accounts receivable, net of estimated uncollectibles of		
\$214,564 in 2003 and \$238,439 in 2002	30,967	27,476
Due from third-party payors	4,852	8,769
Receivables from federal and state programs	28,511	40,922
Due from County	750	3,123
Supplies inventories	1,235	1,279
Prepaid expenses and other assets	481	3,378
Total Current Assets	73,242	86,673
Assets whose use is limited	60,207	57,257
Capital assets, net of accumulated depreciation of \$110,167 in 2003		· · · , ·
and \$85,375 in 2002	494,965	518,339
Deferred issuance costs	10,347	10,976
Total Assets	638,761	673,245
LIABILITIES		
Current Liabilities		
Accounts payable	12,141	10,933
Accrued salaries and benefits	11,508	10,546
Other accrued liabilities	249	596
Capital lease obligations	289	380
Certificates of participation	21,890	20,850
Interest payable	14,108	14,514
Arbitrage payable	107	107
Due to County	19,318	36,619
Total Current Liabilities	79,610	94,545
Capital lease obligations, less current installments	_	289
Certificates of participation, less current installments (net of deferred		
amount of refunding and discount)	581,735	601,208
Total Liabilities	661,345	696,042
NET ASSETS (LIABILITIES)		
Invested in capital assets, net of related debt	(98,602)	(93,412)
Restricted for debt service	47,357	44,130
Unrestricted	28,661	26,485
Total Net Liabilities	\$ (22,584)	\$ (22,797)

See accompanying notes to basic financial statements.

# STATEMENTS OF REVENUE, EXPENSES, AND CHANGES IN NET ASSETS

# YEARS ENDED JUNE 30, 2003 AND 2002

## (In Thousands)

	2003	2002
OPERATING REVENUES		_
Net patient service revenue	\$ 320,290	\$ 298,325
Premium revenue - managed care	11,171	10,509
Other	4,215	4,671
Total Operating Revenues	335,676	<u>✓ 313,505</u>
OPERATING EXPENSES		
Salaries and benefits	124,346	110,380
Medi-Cal Matching Fund expense	94,511	87,674
Medical claims expense	<u></u>	1,314
Supplies	47,568	45,128
Professional services	33,884	32,089
Purchased services	24,081	21,394
Insurance	3,161	4,041
Provision for bad debts	20,297	22,516
Utilities  Demociation and acceptions	6,450	4,503
Depreciation and amortization Rent	24,350	24,253
Amortization related to debt	2,121	964
Other	3,046	3,172
	4,019	4,304
Total Operating Expenses	<u> </u>	361,732
Operating Loss	(52,158)	(48,227)
NONOPERATING REVENUES (EXPENSES)		_
State debt service funding	29,735	
State realignment funding	29,483	28,885
Tobacco tax	2,920	, · · · ·
Investment income	5,956	3,685
Interest expense on debt	<del>-</del> (34,143)	(35,195)
Other nonoperating revenues	464	2,025
Other nonoperating expenses	<u> </u>	(2,700)
Total Nonoperating Revenues, Net	33,750	29,598
Loss Before Transfers	(18,408)	(18,629)
Transfers from the County	21,960	19,430
Transfers to the County	(3,339)	(1,921)
Total Transfers From the County, Net	18,621	
Changes in Net Assets	213	(1,120)
Net Liabilities, Beginning of Year	(22,797)	(21,677)
Net Liabilities, End of Year	\$ (22,584)	\$ (22,797)

## STATEMENTS OF CASH FLOWS

# YEARS ENDED JUNE 30, 2003 AND 2002

## (In Thousands)

	2003	2002
CASH FLOWS FROM OPERATING ACTIVITIES		
Receipts from customers	\$ 328,216	\$242,574
Payments to suppliers	(211,993)	(200,184)
Payments to employees	(123,384)	(109,976)
Other (payments) receipts, net	(14,928)	32,633
Net Cash Used in Operating Activities	(22,089)	(34,953)
CASH FLOWS FROM NONCAPITAL FINANCING ACTIVITIES		
State realignment funding received	29,483	28,885
Tobacco tax received	2,920	2,533
Transfers from the County	18,621	19,430
Transfers to the County	-	(1,921)
Other nonoperating (expense) income	(201)	2,025
Net Cash Provided by Noncapital Financing Activities	50,823	50,952
CASH FLOWS FROM CAPITAL AND RELATED FINANCING ACTIVITIES		
State debt service funding	29,735	30,365
Purchase of capital assets	(976)	(889)
Principal payments on capital lease obligations	(380)	(474)
Principal payments on certificates of participation	(20,850)	(19,895)
Interest paid on debt	(34,549)	(35,576)
Net Cash Used in Capital and Related		
Financing Activities	(27,020)	(26,469)
CASH FLOWS FROM INVESTING ACTIVITIES		
Interest on investments	5,956	3,686
Purchase of investments	(2,950)	(174)
Net Cash Provided by Investing Activities	3,006	3,512
Increase (Decrease) in Cash	4,720	(6,958)
Cash, Beginning of Year	339	7,297
Cash, End of Year	\$ 5,059	\$ 339

## STATEMENTS OF CASH FLOWS, Continued

# YEARS ENDED JUNE 30, 2003 AND 2002

## (In Thousands)

	2003	2002
RECONCILIATION OF OPERATING LOSS TO NET CASH USED IN		
OPERATING ACTIVITIES		
Operating Loss	\$ (52,158)	\$ (48,227)
Adjustments to reconcile operating loss to net cash used in operating activities:		
Depriciation and amortization	24,350	24,253
Amortization related to debt	3,046	3,172
Contractual expense	62,887	71,570
Provision for bad debts	20,297	22,516
Decrease (Increase) in:		
Patient accounts receivable	(86,675)	(95,480)
Due from third-party payors	3,917	(3,440)
Receivables from federal and state programs	12,411	(38,910)
Due from County	2,373	(2,815)
Supplies inventories	44	285
Prepaid expenses and other assets	2,897	(2,172)
Increase (Decrease) in:		
Accounts payable	1,208	(504)
Accrued salaries and benefits	962	404
Other accrued liabilities	(347)	(686)
Arbitrage payable	-	(1,043)
Due to County	(17,301)	36,124
Net Cash Used in Operating Activities	\$ (22,089)	\$ (34,953)
SUPPLEMENTAL DISCLOSURE OF NONCASH AND RELATED FINANCING ACTIVITIES		
Write-off of loan receivable	\$ -	\$ 2,700

#### NOTES TO BASIC FINANCIAL STATEMENTS

JUNE 30, 2003 AND 2002

(Dollar Amounts in Thousands)

#### NOTE #1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

#### A. General

The County of San Bernardino (County) Arrowhead Regional Medical Center (Medical Center) is classified as a level II trauma center with eight trauma bays and four additional "swing" trauma rooms that can be used during an emergency. In addition, the Medical Center provides 373 patient beds and has 24 private treatment rooms for diagnosis and treatment of urgent care patients. During fiscal year 2000, the Medical Center assumed the inpatient operations, consisting of 90 beds, from the previously separate Department of Behavioral Health.

The Medical Center is owned by the County, which is a legal subdivision of the state of California charged with governmental powers, and is reflected in the County's comprehensive annual financial report as an enterprise fund. The County's powers are exercised through the Board of Supervisors, which, as the governing body of the County is responsible for the legislative and executive control of the County.

These financial statements present only the Medical Center and do not purport to, and do not, present fairly the financial position of the County and the changes in its financial position and cash flows of its proprietary fund types in conformity with accounting principles generally accepted in the United States of America.

## B. Basis of Accounting

The basic financial statements of the Medical Center are presented using the economic resources measurement focus and the accrual basis of accounting in conformity with accounting principles generally accepted in the United States of America. Revenues are recognized in the period in which they are earned and become measurable. Expenses are recognized in the period in which they are incurred.

Operating revenues include those generated from direct patient care and related support services. Operating expenses include the cost of providing patient care, administrative expenses, and depreciation on capital assets. Revenues and expenses not meeting this definition are reported as nonoperating revenues and expenses.

## C. Accounting Standards

Pursuant to Governmental Accounting Standards Board (GASB) Statement No. 20, Accounting and Financial Reporting for Proprietary Funds and Other Governmental Entities That Use Proprietary Fund Accounting, the Medical Center has elected not to apply the provisions of all relevant pronouncements of the Financial Accounting Standards Board (FASB) issued after November 30, 1989. The Medical Center applies all applicable GASB pronouncements, as well as statements and interpretations of FASB, the Accounting Principles Board (APB) Opinions, and Accounting Research Bulletins (ARBs) of the Committee on Accounting Procedure, issued on or before November 30, 1989, unless those pronouncements conflict or contradict GASB pronouncements.

#### NOTES TO BASIC FINANCIAL STATEMENTS

## JUNE 30, 2003 AND 2002

## (Dollar Amounts in Thousands)

## NOTE #1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES, Continued

## D. Income Taxes

The Medical Center is owned and operated by the County and is exempt from federal and state income tax pursuant to IRC Section 115 and similar provisions of the California Franchise Tax Code and is also exempt from federal and state income tax filing requirements.

## E. Charity Care

The Medical Center provides care to patients who meet certain criteria under its charity care policy without charge or at an amount less than its established rates. Because the Medical Center does not pursue collection of amounts determined to qualify as charity care, they are not reported as revenue. However, the Medical Center monitors the level of charity care provided. See Note # 5.

## F. Net Patient Service Revenue

Net patient service revenue is recorded at established rates less contractual allowances from third-party payors, including estimated retroactive adjustments under reimbursement agreements with third-party payors. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods as final settlements are determined.

## G. Premium Revenue - Managed Care

The Medical Center has agreements with Inland Empire Health Plan (IEHP) and Foundation Health to provide medical services to subscribing participants. Under these agreements, the Medical Center receives monthly capitation payments based on the number of participants, regardless of services actually performed by the Medical Center.

Premium revenue is recognized in the period in which participants are entitled to health care services.

#### H. Cash

The Medical Center maintains a certain portion of its cash on deposit with the County Treasurer.

## I. Assets Whose Use is Limited

Assets whose use is limited represent funds held by a trustee which are legally restricted for bond reserve accounts. Assets whose use is limited that are required for obligations classified as current liabilities are reported as current assets.

#### NOTES TO BASIC FINANCIAL STATEMENTS

JUNE 30, 2003 AND 2002

## (Dollar Amounts in Thousands)

## NOTE #1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES, Continued

## J. Capital Assets

Buildings, improvements, and equipment with a historical cost over \$5,000 are capitalized. Contributed capital assets are reported at their estimated fair value at the date of donation. Depreciation expense is provided using the straight-line method over the estimated useful lives of the respective classes of capital assets. Equipment under capitalized leases is amortized using the straight-line method over the lesser of minimum lease terms or estimated useful lives. The estimated useful lives for computing depreciation expense are as follows:

Buildings40 YearsImprovements3 to 25 YearsEquipment5 to 20 years

## K. Capitalized Interest

The Medical Center capitalizes net interest expense as a cost of property constructed. No amounts were capitalized for the years ended June 30, 2003 and 2002.

## L. Supplies Inventories

Supplies inventories are recorded at the lower of average cost or market.

## M. Net Assets

Net assets of the Medical Center are classified in three components. Net assets invested in capital assets net of related debt consist of capital assets net of accumulated depreciation and reduced by the current balances of any outstanding borrowings used to finance the purchase or construction of those assets. Restricted net assets are noncapital assets that must be used for a particular purpose, as specified by creditors, grantors, or contributors external to the Medical Center. Restricted net assets are reduced by any liabilities payable from restricted assets. Unrestricted net assets are remaining net assets that do not meet the definition of invested in capital assets net of related debt or restricted.

## N. Use of Estimates

The preparation of basic financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the basic financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

#### NOTES TO BASIC FINANCIAL STATEMENTS

## JUNE 30, 2003 AND 2002

#### (Dollar Amounts in Thousands)

## NOTE #1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES, Continued

## O. Accounting Changes and Restatements

On July 1, 2000, the Medical Center implemented three new accounting statements issued by the Governmental Accounting Standards Board (GASB):

- Statement No. 34, Basic Financial Statements and Management's Discussion and Analysis for State and Local Governments:
- Statement No. 37, Basic Financial Statements and Management's Discussion and Analysis for State and Local Government: Omnibus;
- Statement No. 38, Certain Financial Statement Note Disclosures.

The adoption of Statement No. 34 requires the preparation by management of the "Management's Discussion and Analysis" (MD&A) to be included with the basic financial statements as required supplemental information. The Medical Center has elected not to present the MD&A.

## P. Reclassification of Prior Year Amounts

Certain prior year amounts in these financial statements were reclassified to conform to current year presentation.

## NOTE #2 - CASH AND ASSETS WHOSE USE IS LIMITED

#### A. Summary

The Medical Center's cash deposits as of June 30, 2003 and 2002 are summarized as follows:

	2003	2002
Cash	\$ 5,059	\$ 339
Cash - assets whose use is limited	13,470	13,551
Total Cash	\$ 18,529	\$ 13,890

The Medical Center's assets whose use is limited as of June 30, 2003 and 2002 is comprised of the following:

	2003	2002
Cash	\$ 13,470	\$ 13,551
Investments	47,357	44,319
Interest receivable	767	774
Total Assets Whose Use is Limited	\$ 61,594	\$ 58,644

## NOTES TO BASIC FINANCIAL STATEMENTS

JUNE 30, 2003 AND 2002

#### (Dollar Amounts in Thousands)

NOTE #2 - CASH AND ASSETS WHOSE USE IS LIMITED, Continued

## B. Cash Deposits

At June 30, 2003 and 2002, the carrying amount of the Medical Center's cash deposits was \$18,529 and \$13,890, respectively, and the bank balance was \$13,479 and \$13,899, respectively. The entire bank balance was collateralized with securities held by the pledging financial institution's trust department at 110 percent of the deposits, in accordance with the State of California Government Code, in the Medical Center's name.

## C. Custodial Credit Risk and Fair Value of Investments

Debt proceeds are held by a fiscal agent and have been invested in accordance with applicable debt agreements. Investments that are represented by specific identifiable investment securities are classified as to custodial credit risk categories. Category 1 includes investments that are insured or registered, or securities held by the Medical Center or its agent in the Medical Center's name. Category 2 includes investments that are uninsured and unregistered, with securities held by the counterparty's trust department or agent in the Medical Center's name. Category 3 includes investments that are uninsured and unregistered with securities held by the counterparty's trust department or agent but not in the Medical Center's name. The Medical Center's investments at June 30, 2003 and 2002 are summarized as follows:

Туре	Credit Risk Category 2		Category			Carrying mount at iir Value
June 30, 2003						
Categorized investments - U.S. government securities	\$	25,109	\$	25,109		
Noncategorized investments - guaranteed investment contracts				22,248		
Total Investments			\$	47,357		
June 30, 2002						
Categorized investments - U.S. government securities	_\$	22,071		22,071		
Noncategorized investments - guaranteed investment contracts				22,248		
Total Investments			\$	44,319		

#### NOTES TO BASIC FINANCIAL STATEMENTS

JUNE 30, 2003 AND 2002

(Dollar Amounts in Thousands)

#### NOTE #3 - STATE REALIGNMENT FUNDING

The State of California provides support to the Medical Center through a realignment fund. This realignment funding is provided from vehicle license fees and sales tax collected at the state level and allocated to California's counties. The realignment fund replaces state support previously given for specific purposes such as aid to local municipalities affected by decreased levels of tax support, aid to counties which provide services to medically indigent adults, and aid for unreimbursed medical costs of legalized indigent aliens. The amount to be received by the counties is dependent upon the actual change in sales tax and vehicle license fees. The Medical Center's share of these revenues for the years ended June 30, 2003 and 2002 was \$29,483 and \$28,885, respectively. Because the revenues received are not based upon services provided to patients, they have been classified as nonoperating revenue in the accompanying statements of revenues, expenses, and changes in net assets.

#### NOTE #4 - NET PATIENT SERVICE REVENUE

The Medical Center provides services to eligible patients under Medi-Cal and Medicare programs. For the fiscal years ended June 30, 2003 and 2002, the Medi-Cal program represented approximately 46 percent and 45 percent, respectively, and the Medicare program represented approximately 11 percent and 12 percent, respectively, of the Medical Center's net patient service revenue. Medi-Cal inpatient services are reimbursed at contractually agreedupon per diem rates and outpatient services are reimbursed under a schedule of maximum allowances. Medicare inpatient services are reimbursed based upon pre-established rates for diagnostic-related groups. Effective August 1, 2000, outpatient services went from a cost reimbursement payment methodology to prospectively determined payments per procedure under a system called Ambulatory Payment Classifications. A three-year transitional payment provision exists to limit the impact of this new payment system. Certain defined capital and medical education costs related to Medicare beneficiaries continue to be paid based on a cost-reimbursement methodology. The Medical Center is reimbursed for cost-reimbursable items at a tentative rate, with final settlement determined after submission of annual cost reports by the Medical Center and audits thereof by the fiscal intermediary. The Medical Center's classification of patients under these programs and the appropriateness of their admissions are subject to an independent review by a peer review organization under contract with the Medical Center. Reports on the results of such audits have been received through June 30, 2000 for Medicare and Medi-Cal. Adjustments as a result of such audits are recorded in the year the amount can be determined.

#### NOTES TO BASIC FINANCIAL STATEMENTS

JUNE 30, 2003 AND 2002

(Dollar Amounts in Thousands)

NOTE #4 - NET PATIENT SERVICE REVENUE, Continued

Senate Bill 855 - California's Senate Bill 855 (SB-855) was passed by the State Legislature and signed into law in 1991. The bill provides for supplemental Medi-Cal payments to hospitals, which serve a disproportionately high percentage of Medi-Cal and other low-income patients. SB-855 provides additional funds through a reimbursement rate increase at the Medical Center for each Medi-Cal patient day provided, up to a maximum number of days. The Medical Center received \$95,678 and \$102,015 in SB-855 funds for the years ended June 30, 2003 and 2002, respectively. Because the revenues generated are based upon services provided to patients, they have been classified as net patient service revenue in the accompanying statements of operations. The program required the Medical Center to contribute matching funds of \$68,361 and \$67,674 for the years ended June 30, 2003 and 2002, respectively, which were recorded as operating expense in the accompanying statements of revenues, expenses, and changes in net assets. The Medical Center recorded receivables of \$27,053 and \$37,500 for the years ended June 30, 2003 and 2002, respectively, which was included in receivables from federal and state programs.

Senate Bill 1255 - California's Senate Bill 1255 (SB-1255) was passed by the California Legislature and signed into law in 1989. This bill provides a funding mechanism to assist disproportionate share hospitals to fund budget shortfalls. SB-1255 allows disproportionate share hospitals to make voluntary donations to the state. The state then matches the money received with federal funds and redistributes the funds to the eligible hospitals in the subsequent fiscal year. The Medical Center received \$51,674 and \$38,500 in SB-1255 funds for the years ended June 30, 2003 and 2002, respectively. Because the revenues generated are based upon services provided to patients, they have been classified as net patient service revenue in the accompanying statements of revenues, expenses, and changes in net assets. The Medical Center contributed matching funds of \$26,150 and \$20,000 for the years ended June 30, 2003 and 2002, respectively, which were recorded as operating expense in the accompanying statements of revenues, expenses, and changes in net assets. The Medical Center had no related receivables at June 30, 2003 and 2002.

#### *NOTE #5 - CHARITY CARE*

The Medical Center maintains records to identify and monitor the level of charity care it provides. These records include the amount of charges foregone for services and supplies furnished under its charity care policy. The following information measures the level of charity care provided during the fiscal years ended June 30:

Charges foregone based on established rates

2003	2002
\$217,774	\$172,381

#### NOTES TO BASIC FINANCIAL STATEMENTS

JUNE 30, 2003 AND 2002

(Dollar Amounts in Thousands)

#### NOTE #6 - CAPITAL CONTRIBUTIONS

In 1991, the County Board of Supervisors approved the construction and financing plan of the Arrowhead Regional Medical Center project. The Inland Empire Public Facilities Corporation (Corporation) financed the project through the issuance of Certificates of Participation. The Corporation is a nonprofit public benefit corporation formed on May 30, 1986 to serve the County, including the Medical Center, by financing, refinancing, acquiring, constructing, improving, leasing, and selling buildings, building improvements, equipment, land, land improvements, and any other real or personal property for the benefit of the residents of the County. The Corporation is included in the County's reporting entity as a blended component unit. In fiscal year 1999, the Medical Center project assets and liabilities were contributed to the Medical Center.

In accordance with the master lease agreement, the County is to make aggregate lease payments each year as consideration for the use and occupancy of the Medical Center in an amount designated to be sufficient to pay the annual principal and interest due with respect to any construction debt outstanding. Senate Bill 1732 (SB-1732) was passed by the California Legislature and signed into law in October 1998. The law permits qualifying medical centers to receive reimbursement, in addition to their Medi-Cal contract reimbursement, for a portion of the debt service of qualified projects. Under SB-1732, the Medical Center estimates that it will receive proceeds equal to 50 percent of the total debt service costs. Amounts received by the Medical Center in SB-1732 funds during fiscal year 2003 and 2002 amounted to \$29,735 and \$30,365, respectively, which are included as nonoperating revenues in the accompanying statements of revenue, expenses, and changes in net assets. The Medical Center had no related receivables at June 30, 2003 and 2002.

## NOTES TO BASIC FINANCIAL STATEMENTS

## **JUNE 30, 2003 AND 2002**

## (Dollar Amounts in Thousands)

## NOTE #7 -CAPITAL ASSETS

A summary of capital assets activity for the years ended June 30, 2003 and 2002 is as follows:

	Beginning				Ending	
	1	Balance	Additions	Deletions	-	Balance
June 30, 2003						
Land and improvements	\$	22,096	\$ 172	\$ -	\$	22,268
Buildings and improvements		490,481	100	-		490,581
Equipment		91,579	704	_		92,283
Total Capital Assets, Gross		604,156	976	•	<u> </u>	605,132
Less Accumulated Depreciation for:						
Land and improvements		(6)	(3)	-		(9)
Buildings and improvements		(40,445)	(12,389)	-		(52,834)
Equipment		(45,366)	(11,958)			(57,324)
Total Accumulated Depreciation		(85,817)	(24,350)	-		(110,167)
Capital Assets, Net	\$	518,339	\$ (23,374)	\$ -	\$	494,965
June 30, 2002						
Land and improvements	\$	22,096	\$ -	\$ -	\$	22,096
Buildings and improvements		490,481	-	-		490,481
Equipment		90,248	889	_		91,137
Total Capital Assets, Gross		602,825	889	-		603,714
Less Accumulated Depreciation for:						
Land and improvements		(4)	(2)	-		(6)
Buildings and improvements		(28,175)	(12,270)	-		(40,445)
Equipment	***************************************	(32,943)	(11,981)			(44,924)
Total Accumulated Depreciation		(61,122)	(24,253)	-		(85,375)
Capital Assets, Net	\$	541,703	\$ (23,364)	\$ -	\$	518,339

## NOTES TO BASIC FINANCIAL STATEMENTS

## JUNE 30, 2003 AND 2002

## (Dollar Amounts in Thousands)

## NOTE #8 - TRANSACTIONS WITH THE COUNTY

The Medical Center uses the treasury function of the County and at times maintains a cash overdraft with the County which can be repaid only through collection of receivables. The Medical Center did not have a cash overdraft as of June 30, 2003 and 2002.

The Medical Center is allocated a portion of the County's overhead costs. Such expenses totaled \$3,201 and \$1,678 for the years ended June 30, 2003 and 2002, respectively, and are included as operating expense in the accompanying statements of revenues, expenses, and changes in net assets.

The Medical Center is allocated a portion of the County's annual debt service requirement on the County's pension obligation revenue bonds. Such amounts totaled \$3,339 and \$1,921 for the years ended June 30, 2003 and 2002, respectively, and are included in transfers to the County in the accompanying statement of revenues, expenses, and changes in net assets.

The Medical Center also receives funds from the County of a fixed amount for care of the County's medically indigent patients.

## NOTE #9 - LONG-TERM OBLIGATIONS

The following is a summary of changes in long-term obligations for the fiscal years ended June 30, 2003 and 2002:

	June 30, 2003						
	Beginn	ning				Ending	Due within
	Balan	ice	Add	litions	Deletions	Balance	One Year
Certificate of Participation							
Series 1994	\$ 203,9	950	\$	-	\$ (4,490)	\$199,460	\$ 4,620
Series 1995	137,9	935		-	(4,365)	133,570	4,695
Series 1996	65,0	070		-		65,070	-
Series 1997	98,0	545		-	(11,995)	86,650	12,575
Series 1998	176,	510		-	-	176,510	-
Total Capital Assets, Gross	682,	110		-	(20,850)	661,260	21,890
Less							
Deferred amount on refunding	(45,2	257)		-	1,983	(43,274)	-
Discount on debt	(1,4,	795)		-	434	(14,361)	-
Total Certificates of							
Participation				-	(18,433)	603,625	21,890
Capital lease obligations		669			(380)	289	289
Total	\$ (	669	\$	-	\$(18,813)	\$603,914	\$ 22,179

## NOTES TO BASIC FINANCIAL STATEMENTS

## JUNE 30, 2003 AND 2002

#### (Dollar Amounts in Thousands)

NOTE #9 - LONG-TERM OBLIGATIONS, Continued

	June 30, 2002						
	Beginning			Ending	Due within		
	Balance	Additions	Deletions	Balance	One Year		
Certificate of Participation							
Series 1994	\$206,700	\$ -	\$ (2,750)	\$203,950	\$ 4,490		
Series 1995	143,610	-	(5,675)	137,935	4,365		
Series 1996	65,070		-	65,070	-		
Series 1997	110,115	-	(11,470)	98,645	11,995		
Series 1998	176,510		-	176,510			
Total Capital Assets, Gross	702,005	-	(19,895)	682,110	20,850		
Less							
Deferred amount on refunding	(47,365)	-	2,108	(45,257)	<u>.</u>		
Discount on debt	(15,231)	-	436	(14,795)			
Total Certificates of				-			
Participation	639,409	-	(17,351)	622,058	20,850		
Capital lease obligations	1,143	_	(474)	669	380		
Total	\$ 640,552	\$ -	\$(17,825)	\$622,727	\$ 21,230		

## A. Certificates of Participation

The Medical Center's certificates of participation were issued by the Corporation.

Certificates of participation at June 30, 2003 consist of the following:

#### Series 1994

The Medical Center Series 1994 Certificates of Participation were issued by the Corporation dated February 1, 1994 in the amount of \$283,245, with interest rates from 4.60 percent to 7.00 percent.

The Series 1994 Certificates maturing on August 1, 2005, August 1, 2006, August 1, 2019, August 1, 2024, August 1, 2026, and August 1, 2028 are subject to optional redemption in whole or in part on any date in such order of maturity as the Corporation shall determine and by lot within a maturity, on or after August 1, 2004, at the following premiums, plus interest accrued to the redemption date:

Redemption Dates	Premium	
August 1, 2004 to July 31, 2005	2%	
August 1, 2005 to July 31, 2006	1	
August 1, 2006 and thereafter	-	

#### NOTES TO BASIC FINANCIAL STATEMENTS

## JUNE 30, 2003 AND 2002

#### (Dollar Amounts in Thousands)

## NOTE #9 - LONG-TERM OBLIGATIONS, Continued

The Series 1994 Certificates maturing on August 1, 2000 through August 1, 2004, August 1, 2009, August 1, 2017, August 1, 2020, and August 1, 2022 are not subject to optional redemption prior to maturity.

#### Series 1995

The Series 1995 Certificates of Participation were issued by the Corporation dated June 1, 1995 in the amount of \$363,265, with interest rates from 4.80 percent to 7.00 percent.

The Series 1995 Certificates maturing on August 1, 2022 are subject to optional redemption in whole or in part on any date in such order of maturity as the Corporation shall determine and by lot within a maturity, on or after August 1, 2005, at the following premiums, plus interest accrued to the redemption date:

Redemption Dates	Premium	
*		
August 1, 2005 to July 31, 2006	2%	
August 1, 2006 to July 31, 2007	1	
August 1, 2007 and thereafter	-	

The Series 1995 Certificates maturing on and prior to August 1, 2010 and on August 1, 2017 are not subject to optional redemption prior to maturity.

#### Series 1996

The Series 1996 Certificates of Participation were issued by the Corporation dated January 1, 1996 in the amount of \$65,070, with interest rates from 5 percent to 5.25 percent.

The Series 1996 Certificates are subject to optional redemption in whole or in part on any date in such order of maturity as the Corporation shall determine and by lot within a maturity, on or after August 1, 2006, at the following premiums, plus interest accrued to the redemption date:

Redemption Dates	Premium
August 1, 2006 to July 31, 2007	2%
August 1, 2007 to July 31, 2008	1
August 1, 2008 and thereafter	-

#### Series 1997

The Series 1997 Certificates of Participation were issued by the Corporation dated September 1, 1997 in the amount of \$121,095, with interest rates from 4.30 percent to 5.50 percent.

The Series 1997 Certificates are not subject to optional redemption prior to maturity.

#### NOTES TO BASIC FINANCIAL STATEMENTS

JUNE 30, 2003 AND 2002

(Dollar Amounts in Thousands)

NOTE #9 - LONG-TERM OBLIGATIONS, Continued

#### Series 1998

The Series 1998 Certificates of Participation were issued by the Corporation dated October 22, 1998, in the amount of \$176,510. Interest with respect to the Certificates is payable at an adjustable weekly interest rate which may be converted to a fixed interest rate at the option of the Corporation. The Corporation entered into an interest rate swap agreement with Merrill Lynch Capital Services, Inc. which provides that the Corporation will pay a fixed rate of 4.1895 percent to the Swap Provider on a notional amount equal to the principal amount of the Series 1998 Certificates and the Swap Provider will pay interest to the Corporation at a variable rate of interest on such notional amount, such payments to be made on a net basis. See information below.

The Series 1998 Certificates are subject to optional redemption prior to their maturity at a redemption price equal to the principal amount thereof, plus accrued interest to the date of redemption as follows:

- a) Prior to the Conversion Date, fixed interest rate, at a redemption price equal to the principal amount called for redemption without premium.
- b) After the Conversion Date, at a redemption price of 100 percent of the principal amount plus a premium to be determined on or prior to the Conversion Date.

The proceeds from the Series 1998 Certificates of Participation (Certificates) were used for the advance refunding for \$160,700 of previously issued Series 1995 Certificates of Participation. Government securities were purchased with the proceeds and those securities were deposited in an irrevocable trust with an escrow agent to provide debt service until the remaining outstanding Certificates mature. The advance-refunding method met the requirements of an in-substance defeasance and the remaining outstanding Certificates were removed as a liability of the Medical Center.

As of June 30, 2003, the balance of defeased debt outstanding, but removed from the Medical Center's accounting records, was \$276,630.

## **Interest Rate Swap**

Objective of the interest rate swap. As a means to lower financing costs, and to reduce the risks to the Corporation associated with the fluctuation in market interest rates, the Corporation entered into an interest rate swap in connection with the Medical Center Series 1998 Certificates of Participation (Series 1998 Certificates) in the amount of \$176,510. The intention of the swap was to effectively change the variable interest rate on the bonds to a synthetic fixed-rate of 4.1895 percent.

#### NOTES TO BASIC FINANCIAL STATEMENTS

JUNE 30, 2003 AND 2002

### (Dollar Amounts in Thousands)

NOTE #9 - LONG-TERM OBLIGATIONS, Continued

Terms. The Series 1998 Certificates and the related swap agreement mature on August 1, 2026, and the swap's notional amount of \$176,510 matches the \$176,510 variable-rate COPs. The swap was effective at the same time the Series 1998 Certificates were issued on October 22, 1998. Starting in fiscal year 2008-09, the notional value of the swap and the principal amount of the associated debt decline. Under the swap agreement, through August 1, 2005, the Corporation pays Merrill Lynch a fixed rate of 4.1895 percent and Merrill Lynch pays the Corporation an amount equal to the variable rate interest payable on the outstanding Series 1998 Certificates. After August 1, 2005, the Corporation pays Merrill Lynch a fixed payment of 4.1895 percent and receives from Merrill Lynch a variable payment computed as 73 percent of the monthly London Interbank Offered Rate (LIBOR). Conversely, the Series 1998 Certificates variable-rate coupons have historically been similar to the Bond Market Association Municipal Swap Index (BMA).

Fair Value. Because interest rates have declined since execution of the swap, the swap had a negative fair value of \$18,711 as of June 30, 2003. The swap's negative fair value may be countered by a reduction in total interest payments required under the variable-rate bonds, creating a lower synthetic interest rate. Because the coupons on the variable-rate Series 1998 Certificates adjust to changing interest rates, the Series 1998 Certificates do not have a corresponding fair value increase. The fair value was the quoted market price from Merrill Lynch at June 30, 2003.

Credit Risk. The swap counterparty was rated Aa3 by Moody's and A+ by Standard & Poor as of June 30, 2003. The swap agreement specifies that if the long-term senior unsecured debt rating of Merrill Lynch & Co. is withdrawn, suspended or falls below A- (Standard & Poor) or A3 (Moody's), a collateral agreement will be executed within 30 days or the swap agreement will terminate.

Basis Risk. The swap exposes the Corporation to basis risk should the relationship between LIBOR and BMA converge, changing the synthetic rate on the Series 1998 Certificates. If a change occurs that results in the rates moving to convergence, the expected cost savings may not be realized. As of June 30, 2003, the BMA rate was .98 percent, whereas 73 percent of LIBOR was .8176 percent.

Termination Risk. The Corporation or the counterparty may terminate the swap if the other party fails to perform under the terms of the contract. The swap may be terminated by the Corporation if Merrill Lynch's credit quality rating falls below A- as issued by Standard & Poor or A3 by Moody's. If the swap is terminated, the variable-rate Series 1998 Certificates would no longer carry a synthetic interest rate. Also, if at the time of termination the swap has a negative fair value, the Corporation would be liable to Merrill Lynch for a payment equal to the swap's fair value.

## NOTES TO BASIC FINANCIAL STATEMENTS

## JUNE 30, 2003 AND 2002

## (Dollar Amounts in Thousands)

## NOTE #9 - LONG-TERM OBLIGATIONS, Continued

Swap payments and associated debt. Using rates as of June 30, 2003, debt service requirements of the variable-rate debt and net swap payments, assuming current interest rates remain the same for their term, were as follows. As rates vary, variable rate Series 1998 Certificates interest payments and net swap payments will vary.

	Variable Rate Bonds		Variable Rate Bonds Interest Rate					
Fiscal Year	Principal			Interest Swa		Swaps, Net		Total
2004	\$	-	\$	1,729,798	\$	5,665,088	\$	7,394,886
2005		-		1,729,798		5,665,088		7,394,886
2006		-		1,729,798		5,665,088		7,394,886
2007		-		1,729,798		5,665,088		7,394,886
2008		-		1,729,798		5,665,088		7,394,886
2008-27		176,510,000		20,402,963		66,819,706		263,732,669
Totals	\$	176,510,000	\$	29,051,953	\$	95,145,146	\$	300,707,099

## B. Debt Service Requirements

The total annual debt service requirements to maturity for the outstanding certificates of participation as of June 30, 2003 are summarized as follows:

		Total		
Fiscal Year	Princ	cipal Interest		
2004	\$ 2	21,890 \$ 33,538		
2005	2	23,060 32,367		
2006	2	24,350 31,076		
2007	2	25,735 29,694		
2008-12	10	03,800 128,115		
2013-17	g	96,705 103,685		
2018-22	12	25,900 75,083		
2023-27	16	52,500 38,725		
2028-32		77,320 3,843		
Totals	\$ 66	\$ 476,126		

#### NOTES TO BASIC FINANCIAL STATEMENTS

## JUNE 30, 2003 AND 2002

## (Dollar Amounts in Thousands)

## NOTE #9 - LONG-TERM OBLIGATIONS, Continued

#### C. Capital Lease Obligations

The Medical Center has various lease agreements with financial institutions and medical equipment manufacturers expiring at various dates through October 2003, providing for monthly payments at various interest rates. Equipment acquired under these agreements have been accounted for as capital leases.

The schedule of future minimum lease payments on all capital leases is as follows:

Fiscal Year Ending June 30, 2004	\$ 299
Less Amount Representing Interest	(10)
Present value of net minimum lease payments	289
Less Current Portion of Capital Lease Obligations	 (289)
Capital lease obligations, excluding current portion	\$ _

The net book value of equipment acquired under capitalized leases at June 30, 2003 and 2002 was \$270 and \$738 (net of accumulated amortization of \$3,999 and \$3,531), respectively.

## NOTE #10 - ARBITRAGE PAYABLE

Interest earned in excess of interest expense related to tax-exempt debt issued for public purposes must be remitted to the federal government following the end of each period of five bond years of the Certificates of Participation. The amount of excess investment earnings calculated as of June 30, 2003 and 2002 totals \$107 and \$107, respectively.

#### NOTE #11 - OPERATING LEASES

Rent expense for operating leases for the years ended June 30, 2003 and 2002 totaled \$766 and \$1,740, respectively.

#### NOTES TO BASIC FINANCIAL STATEMENTS

JUNE 30, 2003 AND 2002

## (Dollar Amounts in Thousands)

#### NOTE #12 - RETIREMENT PLAN

Employees of the Medical Center participate in a cost-sharing multiple-employer defined benefit retirement plan (the Plan) administered by the San Bernardino County Employee's Retirement Association (SBCERA). The Plan is governed by the San Bernardino Board of Retirement under the California County Employees Retirement Act of 1937 (1937 Act). It provides retirement, death, and disability benefits to members. Employees become eligible for membership on their first day of regular employment and become fully vested after five years. SBCERA issues a stand-alone financial report, which may be obtained by contacting the Board of Retirement, 195 North Arrowhead Avenue, San Bernardino, California 92415-0014.

Participating members are required by statute Sections 31621, 31621.2, and 31639.25 of the California Code to contribute a percentage of covered salary based on certain actuarial assumptions and their age at entry into the Plan. Employee contribution rates vary according to age and classification (general or safety). Members are required to contribute 7.11 percent to 10.58 percent of their annual covered salary; of which the County pays approximately 7 percent. Employers are required to contribute 6.67 percent to 14.46 percent of the current year covered payroll. The Medical Center's pension cost for the fiscal years ended June 30, 2003 and 2002 was approximately \$9,400 and \$7,697, respectively. Employee contribution rates are established and may be amended pursuant to Articles 6.1 and 6.8 of the 1937 Act. Employer rates are determined pursuant to Section 31453 of the 1937 Act. The following table shows the County's required contributions and the percentage contributed for the current year and each of the two preceding years:

	County's		
	Required	Percentage	
Year Ended June 30,	Contributions	Contributed	
2001	\$ 58,572	100%	
2002	69,245	100%	
2003	68,361	100%	

Annual

## NOTE #13 - SELF-INSURANCE

The Medical Center participates in the County's self-insurance programs for general liability, unemployment insurance, employee dental insurance, medical malpractice, and workers' compensation claim-related risks.

The activities related to the self-insurance programs are accounted for in the County's Risk Management Funds, separate internal service funds of the County, except for unemployment insurance and employee dental insurance, which are accounted for in the General Fund of the County. The Medical Center participates in these plans through a premium based arrangement that consists of annual amounts not subject to adjustment for adverse claims. Insurance premium expense for the years ended June 30, 2003 and 2002 was \$3,161 and \$2,415, respectively.

## NOTES TO BASIC FINANCIAL STATEMENTS

JUNE 30, 2003 AND 2002

(Dollar Amounts in Thousands)

NOTE #14 - LITIGATION

The Medical Center is the defendant in various lawsuits and other claims arising in the ordinary course of its operations. In the opinion of County Counsel and County officials, the ultimate outcome of these matters will have no significant effect on the financial condition or operations of the Medical Center.